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SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0123 Expires: September 30, 1998

Estimated average burden hours per response . . . 12.00

SEC FILE NUMBER

39065

ANNUAL AUDITED REPORTECEIVED **FORM X-17A-8** PART III

**FACING PAGE** 

Information Required of Brokers and Dealers Pursuant Section 17 of the Securities Exchange Act of 1934 and Rule 17a Chereunder

REPORT FOR THE PERIOD BEGINNING.	01-01-2001	AND ENDING _	12-31-2001
	MM/DD/YY		MM/DD/YY
A. RE	GISTRANT IDENT	TFICATION	
NAME OF BROKER-DEALER:			
ALLIED FINANCIAL ADVISORS, INC.			OFFICIAL USE ONLY
ADDRESS OF PRINCIPAL PLACE OF BUS	SINESS: (Do not use P	.O. Box No.)	FIRM ID. NO.
4700 N. PROSPECT ROAD, SUITE 6	<b>,</b>	,	
	(No. and Street)		
PEORIA HEIGHTS	ILLINOIS	6	31616
(City)	(State)		(Zip Code)
JAMES E. ZOGBY	ERSON TO CONTACT IN REGARD TO THIS REPORT (309) 688 - 1800		
			(Area Code — Telephone No.)
<u>B. AC</u>	COUNTANT IDEN	TIFICATION	,
INDEPENDENT PUBLIC ACCOUNTANT RENNER, RICHARD L.	whose opinion is contai	ned in this Report*	
(N	me — if individual, state last, fir	st, middle name)	
207 MAIN STREET, SUITE 405	PEORIA	ILLINOIS	61602
(Address)	(City)	(State)	Zip Code)
CHECK ONE:  Certified Public Accountant  Public Accountant  Accountant not resident in Unite	d States or any of its p	ossessions.	PROCESSI APR 0 9 200
	FOR OFFICIAL USE	ONLY	
	Service and the service of the servi	N	THOMSON FINANCIAL

\*Claims for exemption from the requirement that the annual report be covered by the opinion of an independent public accountant must be supported by a statement of facts and circumstances relied on as the basis for the exemption. See section 240.17a-5(e)(2).



## OATH OR AFFIRMATION

I, JAMES E. ZOGBY , swear (or affirm) that, to the
best of my knowledge and belief the accompanying financial statement and supporting schedules pertaining to the firm of
Allied Financial Adulsors, (NC., as of
DECEMBER , \$2001, are true and correct. I further swear (or affirm) that neither the company
nor any partner, proprietor, principal officer or director has any proprietary interest in any account classified soley as that of
a customer, except as follows:
NONE
BRENDA LEE NEISLER
NOTARY PUBLIC, STATE OF ELINOIS  MY COMMISSION EXPRES 08/27/03  POES 1 D E N T
Tide To a Ser
Notary Public
This report** contains (check all applicable boxes):
(a) Facing page.
☐ (b) Statement of Financial Condition.
(c) Statement of Income (Loss).
(d) Statement of Changes in Financial Condition.
(e) Statement of Changes in Stockholders' Equity or Partners' or Sole Proprietor's Capital.  (f) Statement of Changes in Liabilities Subordinated to Claims of Creditors.
(g) Computation of Net Capital
(h) Computation for Determination of Reserve Requirements Pursuant to Rule 15c3-3.
(i) Information Relating to the Possession or control Requirements Under Rule 15c3-3.
[] (j) A Reconciliation, including appropriate explanation, of the Computation of Net Capital Under Rule 15c3-1 and the
Computation for Determination of the Reserve Requirements Under Exhibit A of Rule 15c3-3.
(k) A Reconciliation between the audited and unaudited Statements of Financial Condition with respect to methods of consolidation.
☐ (l) An Oath or Affirmation.
(m) A copy of the SIPC Supplemental Report.
(n) A report describing any material inadequacies found to exist or found to have existed since the date of the previous audit.

<sup>\*\*</sup>For conditions of confidential treatment of certain portions of this filing, see section 240.17a-5(e)(3).

## ALLIED FINANCIAL ADVISORS, INC.

## STATEMENT OF CHANGES IN OWNERSHIP EQUITY

For the year ended December 31, 2001

Balance, beginning of period	\$ 54,157	
Net Income •	10,970	
Additions (includes non-conforming capital of \$ 0.00)	0	
Deductions (includes non-conforming capital of \$ 0.00)	0	
Balance end of period	<b>\$</b> 65 127	